PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

16869 P-089400US

TOTAL CLAIMS	CLAIMS AS FILED - PART I						O\		SMALL ENTITY			OTHER THAN		
NUMBER FILED NUMBER EXTRA NUMBER EXTRA	TO	OTAL CLAIMS		(Column 1)		(Column 2)		_	TYPE		OR			
TOTAL CHARGEABLE CLAIMS	TOTAL CLAIMS			16					RATE	FEE			FEE	
MULTIPLE DEPENDENT CLAIMS	FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	375.00	OR	BASIC FEE	750.00	
# If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER PREVIOUSLY PAID FOR AMENDMENT PRESENT FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total Total (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 6) (Column 7) (Column 7) (Column 7) (Column 8) AMENDMENT PRESENT REMAINING AFTER AMENDMENT Total Total Total Total Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total T	TOTAL CHARGEABLE CLAIMS) minus 20=		*)	X\$ 9=		OR	X\$18=		
# If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * CLAIMS REMAINING AFTER PREVIOUSLY PAUD FOR AMENDMENT PRESENT Total * Minus * Independent * Minus * FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM Total * Minus * Minus	IND	EPENDENT CL	AIMS			*		7	X42=		OR	X84=	108	
TOTAL OR TOTAL ON SMALL ENTITY CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) Total * Minus ** = ADDI- FEE Independent * Minus ** = TOTAL	MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					140=		OR	+280=		
Column 1	* If	the difference	in column 1 is	less than ze	ero, enter	r "0" in c	"0" in column 2		OTAL			TOTAL	918	
Column 1 Column 2 Column 3		C			<u> </u>		OTHER	THAN						
REMAINING RATE RATE TIONAL FREE RATE TIONAL FEE							(Column 3)	MALL E	ENTITY	OR				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	NDMENT A		REMAINING AFTER		NUM PREVIO	BER OUSLY		F	RATE	TIONAL		RATE	TIONAL	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=		
Column 1) Column 2 Column 3 Calims Cal	AME		l	<u> </u>		5 01 444	=		X42=		OR	X84=		
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT Total * Minus *** =		FIRST PRESE				CLAIM		 -	140=		OR	+280=		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PRESENT EXTRA FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM Independent Minus Minus									TOTÁL			TOTAL		
Total * Minus *** = Independent * Minus *** =									OIT. FEE		OH	ADDIT. FEE		
REMAINING AFTER PREVIOUSLY PAID FOR TOTAL AMENDMENT PRICE TOTAL ADDIT. FEE Total * Minus ***	_						(Column 3)	_					,	
TOTAL ADDIT. FEE ADDIT. FEE ADDIT. FEE			REMAINING AFTER		NUM PREVI	BER OUSLY		F	RATE	TIONAL		RATE	TIONAL	
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COLUMN 1) (Column 2) (Column 3) CLAIMS REMAINING REMAINING AFTER AMENDMENT RATE RATE RATE RATE RATE RATE RATE RAT	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=			+280=) pe 41	
CLAIMS REMAINING AFTER AMENDMENT Total **If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." (Column 2) (Column 3) HIGHEST NUMBER PRESENT EXTRA PRESENT EXTRA RATE ADDI- TIONAL FEE X\$ 9= OR X\$18= ADDI- TIONAL FEE AV\$ 9= OR ADDI- TIONAL FEE OR TOTAL ADDIT. FEE **TOTAL ADDIT. FEE	· I										OR			
CLAIMS REMAINING AFTER AMENDMENT Total **If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **ADDI- TIONAL FEE **ADDI- TIONAL FEE **X\$ 9= OR **X\$18= **X\$42= OR **TOTAL ADDIT. FEE **ADDI- TIONAL FEE **ADDIT. FEE **ADDIT. FEE			(Column 1)		(Colui	mn 2)	(Column 3)	ADL	J. 1. C.C.		•	ADDIT: I EE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."	ENT C		CLAIMS REMAINING AFTER		HIGH NUM PREVIO	IEST BER OUSLY	PRESENT	F	RATE	TIONAL		RATE	TIONAL	
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